REMARKS

Applicants have received and carefully reviewed the Final Office Action mailed July 6, 2007, prior to preparing this response. Currently, claims 1-21 and 24 are pending in the application, wherein claims 1-21 and 24 have been rejected. Claims 1, 5-7, 17 and 24 have been amended with this paper, claim 26 has been added, and claims 3 and 4 have been cancelled. Support for amendments to claims 1 and 24 may be found, for example, at lines 20-23 of page 8. The amendments to claim 17 and newly added claim 26 find support at line 18 of page 12 through line 5 of page 13 and in Figures 4 and 5, for example. No new matter has been added. Reconsideration and allowance of the pending claims are respectfully requested.

Rejections under 35 U.S.C. § 102(b)

Claims 1-4, 6, 8-12, 15-16 and 24 stand rejected under 35 U.S.C. §102(b) as being anticipated by Daneshvar, U.S. Patent No. 5,728,066.[1] Applicants respectfully traverse this rejection. Claims 3 and 4 have been cancelled with this paper, rendering the rejection of these claims moot.

Claims 1-4, 6, 8-16 and 24 stand rejected under 35 U.S.C. §102(b) as being anticipated by Shapiro, U.S. Patent No. 5,027,812. Applicants respectfully traverse this rejection. Claims 3 and 4 have been cancelled with this paper, rendering the rejection of these claims moot.

Claim 1, as currently amended, includes the limitation that the external inflation component includes a proximal segment and a distal segment extending distal of the proximal segment, wherein the proximal segment includes a metallic hypotube and the distal segment includes a polymer tube extending distal of the metallic hypotube.

One of skill in the art would conclude that no portion of the inflation tubing 8, 9 of Daneshvar is taught as including a metallic hypotube and polymer tube as currently claimed. Furthermore, one of skill in the art would conclude that no portion of the inflation line 13 of Shapiro is taught as including a metallic hypotube and polymer tube as currently claimed.

Therefore, neither Daneshvar nor Shapiro teaches at least these limitations of claim 1. Thus, Applicants assert neither the teachings of Daneshvar nor the teachings of Shapiro anticipate claim 1. For at least this reason, claim 1, as well as claims 2, 6, 8-12 and 15-16 which

[1] It is believed that in the Office Action, Daneshvar was incorrectly indicated as U.S. Patent No. 5,725,066. Applicants assume that the Examiner intended to refer to U.S. Patent No. 5,728,066. Appropriate clarification is requested.

depend from claim 1, are believed to be patentable over Daneshvar. Similarly, for at least this reason, claim 1, as well as claims 2, 6, and 8-16 which depend from claim 1, are believed to be patentable over Shapiro. Withdrawal of the rejections is respectfully requested.

Claim 24, as currently amended, includes the limitation that the external inflation component includes a proximal segment and a distal segment extending distal of the proximal segment, wherein the proximal segment includes a metallic hypotube and the distal segment includes a polymer tube extending distal of the metallic hypotube.

Applicants assert neither Daneshvar nor Shapiro teach at least these limitations of claim 24. For at least this reason, Claim 24 is believed to be patentable over the teachings of Daneshvar and over the teachings of Shapiro. Withdrawal of the rejections is respectfully requested.

Claims 17-19 stand rejected under 35 U.S.C. §102(b) as being anticipated by Lee, U.S. Patent No. 6,217,547. Applicants respectfully traverse this rejection.

Claims 17-19 stand rejected under 35 U.S.C. §102(b) as being anticipated by Wasicek et al., U.S. Patent No. 6,117,106. Applicants respectfully traverse this rejection.

Claim 17, as currently amended, includes the limitations that the thickness of the annular wall of the sleeve tapers toward the distal end of the shaft throughout a length of the shaft while the radial distance between the outer surface of the shaft and the inner surface of the sleeve remains constant throughout the length of the shaft in which the thickness of the annular wall tapers, resulting in a catheter with a tapered distal region.

Neither Lee nor Wasicek teaches these limitations of claim 17. As can be seem in FIG. 1 of Lee, the inner tubular member 12 tapers distally. However, the radial distance between the outer surface of the inner tubular member 12 and the inner surface of the outer tubular member 11 increases as the inner tubular member 12 tapers distally. Furthermore, at no point does Wasicek suggest a shaft segment having a distally tapered annular wall.

Thus, Applicants assert neither the teachings of Lee nor the teachings of Wasicek anticipate claim 17. For at least this reason, claim 17, as well as claims 18 and 19 which depend from claim 17, are believed to be patentable over Lee and Wasicek. Withdrawal of the rejections is respectfully requested.

Rejections under 35 U.S.C. § 103(a)

Claims 5 and 7 stand rejected under 35 U.S.C. §103(a) as being unpatentable over Daneshvar, U.S. Patent No. 5,728,066, or Shapiro, U.S. Patent No. 5,027,812. Applicants respectfully traverse this rejection.

Claims 5 and 7 depend from claim 1. For at least the reasons stated above, neither Daneshvar nor Shapiro teaches each and every limitation of claim 1. Therefore, Applicants assert a *prima facie* case of obviousness has not been established regarding claims 5 and 7. Withdrawal of the rejection is respectfully requested.

Claims 20-21 stand rejected under 35 U.S.C. §103(a) as being unpatentable over Lee, U.S. Patent No. 6,217,547 or Wasicek et al., U.S. Patent No. 6,117,106. Applicants respectfully traverse this rejection.

Claims 20-21 depend from claim 17. For at least the reasons stated above, neither Lee nor Wasicek teaches each and every limitation of claim 17. Therefore, Applicants assert a *prima facie* case of obviousness has not been established regarding claims 20 and 21. Withdrawal of the rejection is respectfully requested.

New Claim 26

None of the cited prior art disclose a sleeve extending over a shaft, wherein both the outer surface of the sleeve and the outer surface of the shaft taper toward the distal end of the shaft throughout a length of the shaft while the radial distance between the outer surface of the shaft and the inner surface of the sleeve remains constant throughout the length of the shaft in which the outer surface of the sleeve and the outer surface of the shaft tapers, resulting in a catheter with a tapered distal region, as currently claimed in claim 26.

For at least this reason, claim 26 is believed to be in condition for allowance.

Conclusion

Reexamination and reconsideration are respectfully requested. It is respectfully submitted that all pending claims are now in condition for allowance. Issuance of a Notice of Allowance in due course is requested. If a telephone conference might be of assistance, please contact the undersigned attorney at (612) 677-9050.

Respectfully submitted,

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By their Attorney,

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